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## BIB DATA SHEET

CONFIRMATION NO. 4526

|   |   |                               |   |  |
|---|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/612,600  | <b>FILING or 371(c)<br/>DATE</b><br>07/01/2003<br><b>RULE</b>   | <b>CLASS</b><br>536           | <b>GROUP ART UNIT</b><br>1648   | <b>ATTORNEY DOCKET NO.</b><br>011068-015-999 |
| <b>APPLICANTS</b><br>Neil T. Parkin, Belmont, CA;<br>Ellen Paxinos, San Jose, CA;<br>Colombe Chappey, San Francisco, CA;<br>Mary T. Wrin, Fremont, CA;<br>Andrea Gamarnik, Chandler, AZ;<br>Christos J. Petropoulos, Half Moon Bay, CA;   |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/393,234 07/01/2002   |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |  |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b><br>11/06/2003   |   |                               |   |  |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/JEFFREY S PARKIN/</u><br>Examiner's Signature | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWINGS</b><br>9   | <b>TOTAL CLAIMS</b><br>21                    |
| <b>INDEPENDENT CLAIMS</b><br>5  |   |                               |   |  |
| <b>ADDRESS</b><br>JONES DAY<br>222 East 41st Street<br>New York, NY 10017-6702<br>UNITED STATES   |   |                               |   |  |
| <b>TITLE</b><br>Method for determining human immunodeficiency virus type 1 (HIV-1) hypersusceptibility to the protease inhibitor amprenavir.  |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>533   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |